page 14, lines 5-15; page 23, line 11 to page 24, line 29; and original claims 57-63.

Support for new claims 79-82 can be found in the specification at the following passages:

cardiac: page 1, line 31 to page 2, line 2; page 2, lines 18-20; page 4, lines 28-29; page 21, lines 12-25; page 22, line 23 to page 23, line 6; page 31, line 23 to page 35, line 26.

cerebral: page 1, line 16.

bowel: page 32, line 4.

placental: page 5, lines 1-2; and page 23, lines 9-10.

temporally-limited: page 21, lines 26-28.

thrombolytic therapy: page 21, lines 26-28.

angioplasty: page 4, lines 29-30; page 22, lines 4-5; page 23, lines 4-5; and page 36, line 1 to page 40, line 15.

silent: page 1, lines 28-30 and page 29, lines 13-25.

With the foregoing amendments, there are 15 independent claims and 57 dependent claims for a total of 72:

Independent: 1, 9, 19, 28, 33, 43, 52, 53, 54, 55, 56, 57, 70, 71, 74

Dependent: 2, 3, 4, 5, 6, 7, 8, 10, 11, 12, 13, 20, 21, 22, 29, 30, 31, 32, 34, 35, 36, 37, 38, 39, 40, 41, 42, 44, 45, 46, 47, 48, 49, 50, 51, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 72, 73, 75, 76, 77, 78, 79, 80, 81, 82

The fee calculation is therefore as follows:

Total claims 72 - 20 = 52	52 X 9 =	468
Indep. Claims 15 - 3 = 12	12 X 40 =	480
Multiple dep. claims = 0		
Basic fee		345
TOTAL		$1,293

Applicants paid $1369 in filing/claims fees upon entry into national phase. Please credit the overpayment to Deposit Account No. 19-5117. If there has been a mistaken underpayment in fees, please charge any necessary fees to Deposit Account No. 19-5117.

Respectfully submitted,

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APPENDIX

Marked-up amendments to the claims per 37 CFR § 1.121(c)(ii):

36. (Amended) [An immunoassay] The diagnostic kit of claim 70 [for an ischemic event comprising] wherein:

[an excess quantity of a metal ion to mix with a patient sample which comprises naturally-occurring albumin and optionally albumin N-terminal derivatives, said naturally-occurring albumin forming a complex with said metal ion,]

said kit comprises a first elongated solid support having a first and a second end, said first end having for its application site a filter for application of said patient sample mixture, [an]

and wherein said first area of immobilized [antibody] ligand to said albumin-metal complex is between the first end and the second end, and [an] said second area of immobilized ligand to [albumin] derivative is proximate the second end [,

whereby after application of said mixture of patient sample and metal ion to said filter, said albumin-metal complex is immobilized at said area of immobilized antibody, and said albumin N-terminal derivatives migrate and bind to the albumin ligand proximate the second end].

41. (Amended) [An immunoassay] The diagnostic kit [for an ischemic event comprising] of claim 70, wherein:

said kit comprises a circular solid support having as its application site [comprising] an interior filter circle [surrounded by] , and an inner concentric ring and an outer concentric ring, [wherein]

[said inner filter circle is for application of a patient sample comprising naturally-occurring albumin and optionally albumin N-terminal derivatives, said sample having been mixed with an excess quantity of a metal ion, whereby an albumin-metal complex has been formed,]

said inner concentric ring being divided into a first and second half, said first half containing [a] said first area having said ligand to said albumin-metal complex, and

said outer concentric ring [is] being divided into a first and second half, each said outer ring halves aligned with the inner ring halves, and each said outer ring halves [containing] comprising the second area having ligands to [a non N-terminus epitope of naturally-occurring albumin and to albumin N-terminal] said derivatives.

42. (Amended) [An immunoassay] The diagnostic kit [for an ischemic event comprising] of claim 70, wherein:

said kit comprises a circular solid support [comprising] having as its application site an inner filter circle surrounded by a concentric ring, [wherein]

[said inner filter circle is for application of a patient sample comprising naturally-occurring albumin and optionally albumin N-terminal derivatives, said sample having been mixed with an excess quantity of a metal ion, whereby an albumin-metal complex has been formed,] and

said concentric ring [is] being divided into a first and second half, said first half [having a] comprising said first area of ligand to albumin-metal complex, and the second half [having] comprising said second area having ligands to [a non N-terminus epitope of naturally-occurring albumin and to albumin N-terminal] said derivatives.

47. (Amended) [A metal affinity] The diagnostic kit [for an ischemic event comprising] of claim 71 wherein:

said kit comprises a first elongated solid support having a first and a second end, said first end having as its application site a filter for application of a patient sample, and wherein said first [an] area of immobilized metal ion is between the first and the second end, and [an] said second area of immobilized ligand to [naturally-occurring albumin or albumin N-terminal] derivatives is proximate the second end.

52. (Amended) A [monoclonal antibody] ligand directed to an epitope at the N-terminus of the albumin N-terminal derivative which lacks four N-terminal amino acids of SEQ. ID. NO. 1.

53. (Amended) A [monoclonal antibody] ligand directed to an epitope at the N-terminus of the albumin N-terminal derivative which lacks the three N-terminal amino acids of SEQ. ID NO. 1.

54. (Amended) A [monoclonal antibody] ligand directed to an epitope at the N-terminus of the albumin N-terminal derivative which lacks the two N-terminal amino acids of SEQ. ID NO. 1.

55. (Amended) A [monoclonal antibody] ligand directed to an epitope at the N-terminus of the albumin N-terminal derivative which lacks the N-terminal amino acid of SEQ. ID NO. 1.

56. (Amended) A [monoclonal antibody] ligand directed to an epitope at the N-terminus of SEQ. ID NO. 2.

62. (Amended) A method of calibrating an analyzer that detects or measures an ischemic event [according to the method of claim 1] by detecting the amount of albumin that is bound at its N-terminus to metal ion, comprising the step of:

applying the calibrator solution of claim 57 to the analyzer to determine the amount of metal ions bound to the albumin N-terminus, whereby the predetermined ratio of albumin to metal serves as a standard for calibration.

63. (Amended) A method of calibrating an analyzer that detects or measures an ischemic event [according to the method of claim 15] by detecting by absorbance the amount of metal ion that has not bound to the albumin N-terminus in a patient sample, comprising the steps of:

(a) mixing the calibrator composition solution of claim 57 with a predetermined amount of an excess metal salt, whereby said unbound albumin binds to said excess metal ion, generating unbound metal ions,

(b) contacting the mixture of step (a) with color forming [solution] compound to form a colored solution,

(c) applying the mixture of step (b) to the analyzer, whereby the predetermined ratio of albumin to metal serves as a standard for calibration.

64. (Amended) A method of calibrating an analyzer that detects or measures an ischemic event [according to the method of claim 19] by measuring endogenous copper bound to the N-terminus of albumin, comprising the step of:

applying the calibrator solution of claim 57 wherein the metal is copper to the analyzer to determine the amount of copper ions bound to the albumin N-terminus, whereby the predetermined ratio of albumin to copper serves as a standard for calibration.